

## UNITED STATES DEPARTMENT OF COMMERCE

Patent and Trademark Office
Address: COMMISSIONER OF PATENTS AND TRADEMARKS

Washington, D.C. 20231

• .		VATES OF .			
APPLICATION NUMBER	FILING DATE	FIRST NAMED APPLICANT	TT ATTORNEY DOCKET NO.		
•	·			EXAMINER	
			ART UNIT	PAPER NUMBER	
				23	
			DATE MAILED:		
	INTERV	IEW SUMMARY	DATE MAILED.	•	
All participants (applicant, applicant)	s representative PTO parconno	<b>M</b> .			
(1) A C 1 OS 1 A	10 Colores	n). Da 1			
(1) PIGNORY	1. 1 000016/	(3)			
$(2) \qquad (5)$	Clay	(4)			
Date of Interview6	1/03	<del></del> .			
Type: Telephonic Personal	/ (copy is given to applicant	applicant's representative	a).		
Exhibit shown or demonstration conducted: Yes No If yes, brief description:					
	100 00 11 yes,	blief description			
	**				
Agreement was reached.	is not reached.			•	
Claim(s) discussed:				<u> </u>	
Identification of prior art discussed:_	Rheagne				
	•				
Description of the general nature of v	what was agreed to if an agreem	ont was reached as any other	ATTO	O NO.	
been estad he	Carana ila sandi a	ient was reactied, or any other	r comments:	2 1 2	
V is	1 1 - 2	y wu aa	er con sixal	AMENS 3	
Firell point 7	oustruction	a over Rhea	ume, at 21	Karyle,	
in an RCE	- EMMINEL	will gran	of intervi	ew /	
desired & will	NOT 100LE of	THE WOLLD WAS	and a		
(A fuller description if possesses and		101/101-1-0	10		
( A fuller description, if necessary, and must be attached. Also, where no co attached.)	py of the amendments which we	available, which the examiner ould render the claims allowat	agreed would render the ble is available, a summ	ne claims allowable ary thereof must be	
1. Alt is not necessary for applicant	t to provide a separate record of	the substance of the intervie	<b>w.</b>		
Unless the paragraph above has bee IS NOT WAIVED AND MUST INCLUI action has are ready been filed, APPI SUBSTANCE OF THE INTERVIEW.	DE THE SUBSTANCE UP THE	INTERVIEW (See MPEP Se	ction 712 04). If a rooms	anno to the less Office	
rejections and requirements that	summary above (including any at may be present in the last Off onse requirements of the last Off re is also checked.	ice action, and since the claim	ne are now allowable. H	ic completed form	

Examiner Note: You must sign this form unless it is an attachment to another form.